



# Office of United States Senator John Hoeven

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*Representing the State of North Dakota*

## Service Academy Nomination Application

*Privacy Act Statement: The submission of the requested information constitutes authorization for review of this information by Senator John Hoeven, his staff, his Service Academy Review Board, the Academy Admission Office, and the media.*

## **INSTRUCTIONS**

- 1. All applicants, in compliance with guidelines established by each of the Service Academies, must meet the following requirements in order to be considered for a Congressional nomination:**
  - Age: Applicant must be at least 17 years old, but not yet 23 years of age on July 1, of the year of admission (25th birthday for the Merchant Marine Academy).
  - Citizenship: Applicant must be a United States citizen and a legal and permanent resident of North Dakota.
  - Marital Status: Applicant must be unmarried, not pregnant, and have no legal obligation to support children or other dependents.
- 2. Completed applications must be postmarked no later than October 5th 2012, and must be mailed to Senator Hoeven's Fargo Office, located at:**

Office of Senator John Hoeven  
1802 32nd Avenue South, Room B  
Fargo, North Dakota 58103
- 3. Completed applications must include each of following items:**
  - ☐ Completed Application Form
  - ☐ Official High School Transcript, including most current GPA and class rank
  - ☐ College Entrance Test Scores (ACT/SAT)
  - ☐ Essay Response
  - ☐ Three Letters of Recommendation
  - ☐ Photograph
- 4. Questions can be addressed at 701.239.5389.**

## BIOGRAPHICAL INFORMATION

Full Name:

Date of Birth:

Social Security Number:

Permanent Address:

Temporary Address:

Phone Number:

Email Address:

Are you a U.S. citizen? ☐Yes ☐No

Are you a legal citizen of ND? ☐Yes ☐No

How many years have you lived in ND?

Name of Parent(s)/Guardian(s):

Either parent a career military service member?:

If yes, please note branch of service and rank:

Sibling(s) attending/have attended a Service Academy?: ☐Yes ☐No

If yes, note Academy and graduation date:

## ACADEMY PREFERENCE

If you are interested in attending more than one Service Academy, please rank in order of preference (*1 – 4 with one being your first choice*) the Academies to which you would accept nomination. If you do not mark an Academy, you will not be considered for this Academy.

U.S. Air Force Academy

U.S. Merchant Marine Academy

U.S. Military Academy

U.S. Naval Academy

Please indicate if you are seeking nominations from any of the following sources:

Senator Conrad      Representative Berg      President      Vice President

Other

*It is in your best interest to request a nomination through all sources available to you. If your father or mother is active duty military, retired military, or was killed in action, you may be eligible for a Presidential or Vice Presidential nomination. Please consult the Service Academy Information Sheet for applicable addresses.*

Have you ever attended one of the Academy Summer Seminars?:

☐Yes ☐No

If so, which one and when?:

Have you ever been contacted directly by an Academy?

☐Yes ☐No

If yes, which Academy and who?

Have you ever served in the military in any capacity?

☐Yes ☐No

If yes, what is the highest rank you held?

## **ACADEMIC INFORMATION**

High School Name:

High School Address:

Guidance Counselor Name:

Guidance Counselor's Phone Number:

Graduation Year:

Grade Point Average:

Class Rank (*If your school does not rank, please estimate*):

Test Scores:

SAT Verbal

SAT Math

OR

ACT English

ACT Math

ACT Reading

ACT Science/Reasoning

ACT Plus Writing (*Required by USMA*)

Composite Score

Are you scheduled to re-take any of your tests? ☐Yes ☐No      Date(s):

Please provide an official transcript detailing your high school academic record. The transcript should be submitted in a sealed envelope with a signature across the seal. The transcript must show your most current grades, numerical class rank, and GPA. If any of this information does not appear on your official high school transcript, it is your responsibility to have your school provide an official document detailing this information. If you are a college student, please include any college transcripts.

Please provide official SAT/ACT score reports. If this information does not appear on your official high school transcript, please have your scores forwarded to our office using the following codes: ACT code is 7167; SAT code is 6075.

College Attended (*if applicable*):

Mailing Address:

Major:

Years Attended:

Hours Completed:

Grade Point Average:

Advanced Placement Courses Taken and AP Score:

Academic Awards of Special Achievements:

## **EXTRACURRICULAR ACTIVITIES**

Please use the text fields below to note your involvement in extracurricular activities. Use your discretion to detail pertinent specifics about your involvement in these activities, such as dates of involvement.

### **ATHLETICS**

Include name of sport(s) you have participated in; position played; years participated; special recognitions, etc.

## SCHOOL SPONSORED EXTRACURRICULAR ACTIVITIES

*e.g. JROTC, Band/Orchestra, Student Government*

## COMMUNITY ACTIVITIES

*e.g. Scouting, religious, volunteer activities*

## EMPLOYMENT

*e.g. Include pertinent information regarding nature of job, including name of position and the dates you have held the position.*

## HOBBIES/OUTSIDE INTERESTS

## REFERENCES

Please provide three letters of recommendation. At least one letter should be written by an academic reference.

## ESSAY

On a separate piece of paper, please answer the question: Why do you want to serve as an Officer in the United States Military? Please limit your response to no more than 300 words. Essays should be typed and double-spaced.

## PHOTOGRAPH

Please include a small, recent photograph (*wallet, 4 x 6, or 5 x 7*). Please do not adhere (*staple, glue*) the photograph to any of your application materials.

## **PRIVACY STATEMENT**

I have read the Privacy Act Statement. The information provided in this application is true and correct to the best of my knowledge. I understand that in addition to this application, I am also required to submit all of the items on the application check-list. I further understand that Senator Hoeven's Fargo Office must be in receipt of all application materials no later than 5:00 p.m., October 5, 2012.

Signature:

Date:

### **Return your completed application to:**

The Office of Senator John Hoeven  
Attn: Sally Johnson  
1802 32nd Avenue S  
Fargo, ND 58103